

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



28
RECEIVED
OCT 21
TECHNOLOGY CENTER
10/23/02
Sunka

Applicant: LIU et al.
Serial No: 09/827,056
Filing Date: April 3, 2001

Docket No: 16405-0013
Group Art Unit: 2811
Examiner: Tran, T.F.

For: **METHOD OF FABRICATING HIGH-COUPPLING RATIO SPLIT GATE
FLASH MEMORY CELL ARRAY**

Commissioner for Patents
Washington, D.C. 20231

AMENDMENT TRANSMITTAL

☒ Transmitted herewith is an amendment for this application.

STATUS

☒ Applicant is
☐ a small entity -- verified statement:
☐ attached.
☐ already filed.
☒ other than a small entity.

EXTENSION OF TIME

☒ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 110.00	\$ 55.00
<input checked="" type="checkbox"/>	two months	\$ 400.00	\$200.00
<input type="checkbox"/>	three months	\$ 920.00	\$460.00
<input type="checkbox"/>	four months	\$1,440.00	\$720.00

Fee \$400.00

☒ If an additional extension of time is required please consider this a petition therefor.

☐ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

10/17/2002 SHINASS1 00000120 023964 09827056

01 FC:1252 400.00 CH

Extension fee due with this request **\$400.00**

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on October 9, 2002, with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C., 20231.
Date: October 9, 2002

Vicki Naso
Vicki Naso



Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS



No additional fee for claims required.



Total additional fee for claims required \$ _____.

FEE PAYMENT



Attached is check in the sum of \$



Charge Account No. 02-3964 the sum of \$400.00. for extension of time

A duplicate of this transmittal is attached.

FEE DEFICIENCY

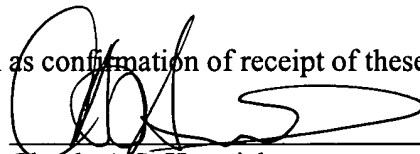


In the event that: a) no check to cover the filing fee is enclosed, b) any above-referenced check is inadvertently omitted or lost, or c) any enclosed check is in an amount less than or greater than the required fee, the Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 02-3964. A duplicate of this authorization is enclosed for that purpose.



Attached is a postcard for date-stamped return as confirmation of receipt of these materials.

Date: Oct 9, 2002



Claude A.S. Hamrick
Reg. No. 22,586

OPPENHEIMER WOLFF & DONNELLY LLP

Customer No. 25696

P.O. Box 10356

Palo Alto, CA 94303

Tel: (650) 320-4000

Fax: (650) 320-4100